

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.  | DATE      |
|---------------------------|----------|---------|-----------|
|                           |          | 71530   | 2/6       |
| FEE DETERMINATION         |          |         |           |
| O.I.P.E. CLASSIFIER       |          |         | 102-18-00 |
| FORMALITY REVIEW          |          | 104-177 | 3-30-00   |
| RESPONSE FORMALITY REVIEW |          |         |           |
|                           |          |         |           |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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